

2003

STATE OF NEBRASKA

**STATUTES RELATING TO
RESPIRATORY CARE**

NEBRASKA HEALTH AND HUMAN SERVICES SYSTEM



Department of Health and Human Services Regulation and Licensure
Credentialing Division
Nebraska State Office Building
301 Centennial Mall South, Third Floor
PO Box 94986
Lincoln, NE 68509-4986

STATUTE INDEX

PRACTICE OF RESPIRATORY CARE

- 71-1,227. Terms, defined.
- 71-1,228. Respiratory care; license required; renewal.
- 71-1,229. Respiratory care service; requirements.
- 71-1,230. Practice of respiratory care; limitations.
- 71-1,231. License; application; requirements.
- 71-1,232. Repealed. Laws 2003, LB 245, s. 19.
- 71-1,233. Practicing respiratory care practitioners; license issued; conditions.
- 71-1,234. Respiratory care; license; renewal; continuing competency requirements.
- 71-1,235. Practices not requiring licensure.
- 71-1,236. Respiratory care practitioner; subject to facility rules and regulations; when.
- 71-1,237. Repealed. Laws 2003, LB 242, s. 154.

STATUTES PERTAINING TO THE PRACTICE OF RESPIRATORY CARE

71-1,227. Terms, defined. As used in sections 71-1,227 to 71-1,236, unless the context otherwise requires:

(1) Board shall mean the Board of Respiratory Care Practice;

(2) Medical director shall mean a licensed physician who has the qualifications as described in section 71-1,229;

(3) Respiratory care shall mean the health specialty responsible for the treatment, management, diagnostic testing, control, and care of patients with deficiencies and abnormalities associated with the cardiopulmonary system. Respiratory care shall not be limited to a hospital setting and shall include the therapeutic and diagnostic use of medical gases, administering apparatus, humidification and aerosols, ventilatory assistance and ventilatory control, postural drainage, chest physiotherapy and breathing exercises, respiratory rehabilitation, cardiopulmonary resuscitation, and maintenance of nasal or oral endotracheal tubes. It shall also include the administration of aerosol and inhalant medications to the cardiorespiratory system and specific testing techniques employed in respiratory care to assist in diagnosis, monitoring, treatment, and research. Such techniques shall include, but not be limited to, measurement of ventilatory volumes, pressures, and flows, measurement of physiologic partial pressures, pulmonary function testing, and hemodynamic and other related physiological monitoring of the cardiopulmonary system; and

(4) Respiratory care practitioner shall mean:

(a) Any person employed in the practice of respiratory care who has the knowledge and skill necessary to administer respiratory care to patients of all ages with varied cardiopulmonary diseases and to patients in need of critical care and who is capable of serving as a resource to the physician and other health professionals in relation to the technical aspects of respiratory care including effective and safe methods for administering respiratory care; and

(b) A person capable of supervising, directing, or teaching less skilled personnel in the provision of respiratory care services.

Source: Laws 1986, LB 277, § 9; Laws 1999, LB 828, § 138; Laws 2003, LB 242, § 61. Operative date July 1, 2004.

71-1,228. Respiratory care; license required; renewal. No person shall engage in the practice of respiratory care unless he or she is licensed for such purpose pursuant to the Uniform Licensing Law. Licenses shall be renewed on June 1 of each even-numbered year.

Source: Laws 1986, LB 277, § 10; Laws 2002, LB 1021, § 29; Laws 2003, LB 242, § 62. Operative date July 1, 2004.

71-1,229. Respiratory care service; requirements. Any health care facility or home care agency providing inpatient or outpatient respiratory care service shall designate a medical director, who shall be a licensed physician who has special interest and knowledge in the diagnosis and treatment of respiratory problems. Such physician shall (1) be an active medical staff member of a licensed health care facility, (2) whenever possible be qualified by special training or experience in the management of acute and chronic respiratory disorders, and (3) be competent to monitor and assess the quality, safety, and appropriateness of the respiratory care services which are being provided. The medical director shall be accessible to and assure the competency of respiratory care practitioners and shall require that respiratory care be ordered by a physician who has medical responsibility for any patient that needs such care.

Source: Laws 1986, LB 277, §11. Effective date July 17, 1986.

71-1,230. Practice of respiratory care; limitations. The practice of respiratory care shall be performed only under the direction of a medical director and upon the order of a licensed physician.

Source: Laws 1986, LB 277, §12. Effective date July 17, 1986.

71-1,231. License; application; requirements. (1) An applicant for a license to practice respiratory care shall submit to the board written evidence, verified by oath, that the applicant has completed a respiratory care educational program accredited by the American Medical Association's Committee on Allied Health Education and Accreditation in collaboration with the Joint Review Committee for Respiratory Therapy Education or an accrediting agency approved by the department.

(2) In order to be licensed, initial applicants shall pass an examination approved by the department on the recommendation of the board.

Source: Laws 1986, LB 277, § 13; Laws 2002, LB 1062, § 38. Operative date July 20, 2002.

71-1,232. Repealed. Laws 2003, LB 245, s. 19.

71-1,233. Practicing respiratory care practitioners; license issued; conditions. The board shall, with the approval of the department, issue a license to perform respiratory care to an applicant who, on or before July 17, 1986, has passed the Certified Respiratory Therapy Technician or Registered Respiratory Therapist examination administered by the National Board for Respiratory Care or the appropriate accrediting agency acceptable to the department.

Source: Laws 1986, LB 277, § 15; Laws 1988, LB 1100, § 84; Laws 2003, LB 245, § 15. Operative date January 1, 2004.

71-1,234. Respiratory care; license; renewal; continuing competency requirements. Each Nebraska-licensed respiratory care practitioner in active practice within the State of Nebraska shall, on or before June 1 of each even-numbered year, complete continuing competency activities as required by the board pursuant to section 71-161.09 as a prerequisite for the licensee's next subsequent license renewal.

Source: Laws 1986, LB 277, § 16; Laws 1994, LB 1210, § 94; Laws 1997, LB 307, § 128; Laws 2002, LB 1021, § 30. Operative date January 1, 2003.

71-1,235. Practices not requiring licensure. Sections 71-1,227 to 71-1,236 shall not prohibit:

(1) The practice of respiratory care which is an integral part of the program of study by students enrolled in approved respiratory care education programs;

(2) The gratuitous care, including the practice of respiratory care, of the ill by a friend or member of the family or by a person who is not licensed to practice respiratory care if such person does not represent himself or herself as a respiratory care practitioner;

(3) The practice of respiratory care by nurses, physicians, physician assistants, physical therapists, or any other professional licensed under the Uniform Licensing Law when such practice is within the scope of practice for which that person is licensed;

(4) The practice of any respiratory care practitioner of this state or any other state or territory while employed by the federal government or any bureau or division thereof while in the discharge of his or her official duties;

(5) Techniques defined as pulmonary function testing and the administration of aerosol and inhalant medications to the cardiorespiratory system as it relates to pulmonary function technology administered by a registered pulmonary function technologist credentialed by the National Board for Respiratory Care or a certified pulmonary function technologist credentialed by the National Board for Respiratory Care; or

(6) The performance of oxygen therapy or the initiation of noninvasive positive pressure ventilation by a registered polysomnographic technologist relating to the study of sleep disorders if such procedures are performed or initiated under the supervision of a licensed physician at a facility accredited by the American Academy of Sleep Medicine.

Source: Laws 1986, LB 277, § 17; Laws 1997, LB 622, § 83; Laws 2003, LB 242, § 64; Laws 2003, LB 667, § 5. Note: The changes made by LB 667 became effective August 31, 2003. The changes made by LB 242 became operative July 1, 2004.

71-1,236. Respiratory care practitioner; subject to facility rules and regulations; when. In the event a respiratory care practitioner renders respiratory care in a hospital or health care facility, he or she shall be subject to the rules and regulations of that facility. Such rules and regulations may include, but not be limited to, reasonable requirements that the respiratory care practitioner maintain professional liability insurance with such coverage and limits as may be established by the hospital or other health care facility upon the recommendation of the medical staff.

Source: Laws 1986, LB 277, §18. Effective date July 17, 1986.

71-1,237. Repealed. Laws 2003, LB 242, s. 154.